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18TH AND CHE	KRY SIREEIS A, PA 19103-6996			Darnyl Pra	atcher	(Depositor's name)	
THEREE	1,111 17103 0770			Dame	ReteL	(Signature)	
				October	14, 2008	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/677,662	10/02/2003		Gideon Dreyfuss	05	3893-5027-01	9955	
FLE OF INVENTION:	ISOLATED POLYPE	PTIDE DELETION MUT	ANTS OF SURVIVAL OF	MOTOR NEURON-INT	ERACTING PROTE	IN I	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$720	\$300	\$0	\$1020	10/22/2008	
EXAMINER ART UNIT		CLASS-SUBCLASS					
BUNNER, BRIDGET E 1647		435-325000					
R 1.363).  Change of correspo Address form PTO/SB.  "Fee Address" indic	cation (or "Fee Address	ange of Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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PLEASE NOTE: Unle recordation as set forth	ss an assignee is ident in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the pa T a substitute for filing an a	tent. If an assignee is id ssignment.	entified below, the do	cument has been filed for	
(A) NAME OF ASSIG			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
of Pennsylva			Philadelphia, PA				
ase check the appropria	ite assignee category or	categories (will not be pr	inted on the patent):	Individual Corporation	on or other private grou	up entity Government	
The following fee(s) and Issue Fee Publication Fee (No	small entity discount p		b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0573. (enclose an extra copy of this form).				
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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  TE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other							
rest as shown by the re	cords of the United Sta	tes Patent and Trademark	Office.		——————		
Authorized Signature _	Kuthing	Dopl	Date October 14, 2008				
Typed or printed name	Kathryn	Doyle	Registration No. 34,317				
nitting the completed form and/or suggestio 1450, Alexandria, Vii kandria, Virginia 2231	application form to the ns for reducing this but ginia 22313-1450. DC 3-1450.	CUSPTO. Time will vary rden, should be sent to the NOT SEND FEES OR C	on is required to obtain or re 1.14. This collection is estitle depending upon the indivite chief Information Office COMPLETED FORMS TO sepond to a collection of information	dual case. Any comments , U.S. Patent and Tradem THIS ADDRESS. SEND	on the amount of tim ark Office, U.S. Depar TO: Commissioner fo	rtment of Commerce, P.O. or Patents, P.O. Box 1450,	